
COMBINED DECLARATION AND POWER OF ATTORNEY

**(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION, OR C-I-P)**

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is for an original application.

INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am an original, first and joint inventor of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

SYSTEM FOR PROVIDING ACCESS TO MULTIPLE DISPARATE CONTENT REPOSITORIES

SPECIFICATION IDENTIFICATION

The specification is attached hereto.

ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information, which is material to patentability as defined in 37, Code of Federal Regulations, Section 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent.

POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

APPOINTED PRACTITIONER(S)

Ronald L. Hofer

REGISTRATION NUMBER(S)

26,467

I hereby appoint the practitioner(s) associated with the Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO

Ronald L. Hofer
201 North Tryon Street
P.O. Box 31247
Charlotte, NC 28231

DIRECT TELEPHONE CALLS TO:

Ronald L. Hofer
704-343-2000

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURES

Inventor's signature  Date April 2, 2001
Sean Allen Johnson

Country of
Citizenship US
Residence Charlotte, NC
Post Office Address 9336 Hanworth Trace Drive, Charlotte, NC 28277


Jeffrey Boyd Rayfield

Date April 2, 2001

US

Charlotte, NC

3025 Colvard Park Way, Charlotte, NC 28269


Marc Horer Andrews

Date April 2, 2001

US

Charlotte, NC

2619 Tanbridge Road, Charlotte, NC 28226

Table 1. Demographic characteristics of the study population	
Age (years)	60.0 ± 10.0
Gender	
Male	50 (50%)
Female	50 (50%)
Education (years)	12.0 ± 2.0
Marital status	
Married	40 (40%)
Single	10 (10%)
Divorced	10 (10%)
Widowed	10 (10%)
Occupation	
Retired	40 (40%)
Unemployed	10 (10%)
Employed	10 (10%)
Student	10 (10%)
Health status	
Good	40 (40%)
Fair	10 (10%)
Poor	10 (10%)
Very poor	10 (10%)
Smoking status	
Smoker	10 (10%)
Non-smoker	40 (40%)
Alcohol consumption	
Drinker	10 (10%)
Non-drinker	40 (40%)
Family size	3.0 ± 1.0
Income (USD/month)	1000.0 ± 200.0
Health insurance	
Yes	40 (40%)
No	10 (10%)
Comorbidities	
Hypertension	10 (10%)
Diabetes	10 (10%)
Cholesterol	10 (10%)
Arthritis	10 (10%)
Depression	10 (10%)
Other	10 (10%)